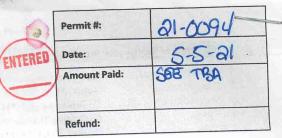
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**





INSTRUCTIONS: No permits will be issued until all fees are paid.

Bayfield Co. Zoning Dept

Checks are made paya	ible to: Bayrield	ALL BER	MITE HAVE	BEEN ISSUED T	O APPL	ICANT. Ori	ginal Ap	plication MUS	T be subm	itted	FILL OUT	IN INK (IN	-		
DO NOT START CONST								CONDITION			ISE 🗆	CONTRACTOR OF THE PARTY OF THE	OTHER		
TYPE OF PERMIT R	EQUESTED-		□ LAI	ND USE	SANIT	- Address:						5	Telephoi		
OWNEY'S NAME: SHANE & RAVEN KLINE				7751 NE 110th AVE BONDURANT IT				5005	5	515-963- Cell Phone: 1101					
Address of Property: 44605 BAY DR					City/State/Zip: ABLE WI 58421 Contractor Phone: Plumber:							r Phone:			
Contractor: NORTH STA	D (1)	INC.			1	WIE)						-	Written		
Authorized Agent: (Person Signing A	pplication	on behalf of	Owner(s))	Agen	t Phone:		Agent Maili	ing Address	(include City/	State/Zip):	ite/Zip): Writ		zation	
					715	5-634		15611		Y RD B WI 54	1243 At			ed □ No	
JIM HAU	GEN				1	3644		HAY	WARD	Val 5 1	Recorded	Document: (
PROJECT	West Control	1				Tax ID#	153	4			Recorded				
PROJECT	Legal Des	cription:	(Use Tax	Statement)				Factorial III	ot(s) #	Block #	Subdivisio	on:			
		G	ov't Lot	Lot(s)	CSIVI VOI & Page			.Ot(S) #	.(3) #		1				
1/4,1/4			l					Lot Size			eage 1.69				
Section 10	, Townshi	p 43	N, Rai	nge <u>06</u>	W	Town	of: NA	MAKAG	ON					1.07	
	Ne Pro	perty/Lai	nd within	300 feet of Ri	iver, Sti	ream (incl. Inter	mittent)	Distance Str	ucture is f	rom Shorelin	e : feet	in Floodpla		Are Wetlands Present?	
	Creek or	Landwa	rd side of	Floodplain?	F Lake, Pond or Flowage			Distance Structure is from Shoreline :				Zone?		XYes □ No	
XShoreland -	→ Is Pro	perty/La	nd within	1000 feet of							feet				
	di salahan	arity!		\$ 100	If	yescontinu	e ->					X NO			
□ Non-Shorelan	d														
E teon shore an	780							Total # c	· F	W	hat Type	e of		Туре о	
Value at Time						Project		bedroom				System(s)		Water	
of Completion * include	P	roject		Project # of Stori	Section 1	Foundation		on			the prop			on	
donated time				# 01 31011	ies .	100 a		propert	У	Will be	on the	property?		proper	
& material	□ New Co	- metruc	tion	☐ 1-Story		☐ Baseme	nt	1		/unicipal/Ci	ty			☐ City	
			on		□ Founda	undation	□ 2	(I	☐ (New) Sanitary Specify Type:			⊠ Well			
re I	☐ Addition/Alteration				ration	☐ Foundation		16.1		X Conitons (Evists) Specify Type:			-		
\$135,000	- C	☐ Conversion			☐ Slab		X 3	D 2	Sanitary (Exists) Specify Type: TANK & DRAIN FIELD						
	Conve								☐ Privy (Pit) or ☐ Vaulted (min 200 g		200 gallo	on)			
☐ Relocate (existing bldg) ☐ ☐ Run a Business on Property				Use None Portable (w/ser				service co							
			-	☐ Year Round ☐ Compos			Compost To	Toilet			-				
			PING			X GRA	NEL	40.		None					
	70						and fine	60'	Wid	th: 38°	_	Heig	ht: 2	.2'	
Existing Struc	cture: (if addit	ion, alte	ration or b	usiness is being	g applie		gth:	Ø0	Wid			Heig			
Proposed Co	nstruction:	(overal	l dimensio	ons)		Len	gui.				sie i kasaista			Square	
		1				Propose	d Struc	ture				Dimensions		Footage	
Propose	d Use	V									(Х)		
			Principa	al Structure	(first s	structure on	tc \	у)		-	(Х)		
Residence			esidence (i.e. cabin, hunting shack, etc.) with Loft						(Х)	11111			
Residential Use			with a Porch								(Х)		
			with (2 nd) Porch							(Х)			
			with a Deck							(Х)	Shu Tilla		
	-	with (2 nd) Deck									X)	77.7		
☐ Commercial Use			with Attached Garage							- 1		1	V - 93		
			Bunkhouse w/ (\square sanitary, \underline{or} \square sleeping quarters, \underline{or} \square cooking & food prep facilities)								es) (X)		
	-	Mobile Home (manufactured date)							- (X)				
☐ Municipal Use			Addition/Alteration (explain)								- (Х)		
			Accessory Building (explain)							- (Х) -			
		-	Accos	sory Buildin	e Addi	tion/Alterat	ion (exp	olain)			_ (Х)		
	- 14		7,0003	I I I and I	inl	PATIO	# WA	LICWAY			(X)	4620	
٣		X	Special Use: (explain) PATIO & WALKWAY							- (Х)	2,500		
			Conditional Use: (explain)							_ (Х)			
Other: (explain) FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES Whether it is a literal with a permit of the p						ENALTIES	74.2								
			FAILUR	RE TO OBTAIN A	PERMIT	or STARTING CO	ONSTRUCT	the best of my (o	ur) knowledge	and belief it is tru	ie, correct an	d complete. I (v	ve) acknow	riedge that I (we)	

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) accompanying information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

(If there are Multiple Owners listed on the Doed/All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Address to send permit _

resigning on behalf of the owner(s) a letter of authorization must accompany this application) 7W CTY RDB HAYWARD WI 54843

Original Application MUST be submitted

If you recently purchased the property send your Recorded De

Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6) Show any (*): (*) Wetlands; or (*) Slopes over 20% (7) LAKE NAMAKAGON WALKWAY SEASONAL RESIDENCE PATIC

DRIVEWAT

Please complete (1) - (7) above (prior to continuing)

GARAGE

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Setback Measurements		Description	Setback Measurements	
Feet		Setback from the Lake (ordinary high-water mark)	Feet	
Feet		, , ,	Feet	
4.1	Ritt	Setback from the Bank or Bluff	Feet	
Feet				
Feet		Setback from Wetland	Feet	
Feet		20% Slope Area on the property	☐ Yes ☐ No	
Feet		Elevation of Floodplain	Feet	
Feet		Setback to Well	Feet	
Feet		*		
Feet				
	Measurements Feet Feet Feet Feet Feet Feet Feet F	Feet Feet Feet Feet Feet Feet Feet Feet	Description	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

ssuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:			
Permit Denied (Date):	Reason for Denial:	a secondorade de la comp					
Permit #: 21-0093	Permit Date: 5-5	5-5-21					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Reco	ord)	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached	☐ Yes ☐ No ☐ Yes ☐ No		
Granted by Variance (B.O.A.) ☐ Yes ☐ Yo Case #:		Previously Granted by Variance (B.O.A.) Previously Granted by Variance (B.O.A.) Case #:					
	lo	Were Property Line	☐ Yes				
nspection Record:	And the state of t	1		Zoning District (R-/) Lakes Classification ()			
Date of Inspection: 4/30/21	Inspected by:	11		Date of Re-Inspection:			
Condition(s): Town, Committee of Board Conditions Att No Note of Install ignature of Inspector:	d Maintein Ra.	No they need to be atter Prvious Su In water 104	rention as pro	ermits oposed	oval:		
Olivon					7/471		

City, Village, State or Federal mits May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL - Class A
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Shane & Raven Kline 21-0094 Issued To: No. Namakagon 10 I ocation: Section **Township** Range 6 Town of CSM# 760 Block Subdivision Gov't Lot Lot

For: Residential Other: [1- Story; Shoreland Grading/ Patio / Walkway = 2,500 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No additional impervious surfaces without permits. Install and maintain rain water retention as proposed.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

May 5, 2021

Date

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - 07-97S
SIGN SPECIAL - NA
CONDITIONAL - NA
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

No: 0	4232101-2021	Tax ID: 24	405	Issued To: THOMAS O & SUSAN M MCKINLEY				
Location: PAR IN GOVT LOT 5 IN V.1005 P.614 326C1		Section 04	Township 43 N.	Range 06 W.	. NAMAKAGON			
Govt I	Lot 0 Lot 0	E	Block 0	Subdivision:	CSM# NA			
For. R	esidential / Other / 12L x 8W x 11	H						
	tion(s): Not to be used for human tion per section 13-2-32(c)(1) Bay			constructed with lowes	t floor at or above regional flood			
NOTE:	This permit expires one year fro construction work or land use h		ce if the authorized	Rob S	Schierman			
	construction work or faile use in	do not began.	Authorized Issuing Official					
	Changes in plans or specification obtaining approval. This permit application information is found	may be void or re	evoked if any of the	Thu May 06 2021				
	erroneous, or incomplete.		Date					
	This permit may be void or revolution		nance conditions are					